

SOLDIERS NAME/ RANK_____ UNIT_____

PLDC PACKET
COVER SHEET

***NOTE: SOLDIER MUST HAVE 6 MONTHS REMAINING IN SERVICE
UPON COMPLETION OF THE COURSE.**

- SCHOOL REQUEST FROM G3 SCHOOLS
- STUDENT PREPARATION CHECKLIST (TASS CHECKLIST)**
- RECORD APFT TEST WITH-IN 6 MONTHS OF COURSE START
DATE
- BODY FAT CONTENT WORKSHEET (if applicable)
- ALTERNATE TRANSPORT REQUEST (if applicable)
- **PERMANENT PROFILE REVIEW (if applicable)
- **RETRAIN RE-ATTENDANCE REQUEST (if applicable)
- CSM/SGM COVER LETTER
- A FIELD MEAL CARD (this item is not optional)

**** SAMPLE FORMS CAN BE FOUND AT:
<http://www.usarak.army.mil/ncoa>**

I have reviewed the contents of this packet and all information is correct and true.

Name/ Position _____ Signature: _____